County: Trempeal eau PI GEON FALLS HEALTH CARE CENTER

Admissions, Discharges, and		Percent Distribution	of Residents'	Condi t	ions, Services,	and Activities as of 12/	′31/01
Deaths During Reporting Period	ļ				O/ Nooding		Total
D			0/		% Needi ng	0/ 77 4 11	Total
Percent Admissions from:	45.0	Activities of	%		sistance of	3	Number of
Private Home/No Home Health	15. 2	Daily Living (ADL)	Independent	Une	Or Two Staff	- I	Resi dents
Private Home/With Home Health	6. 1	Bathi ng	2. 7		78. 4	18. 9	37
Other Nursing Homes	9. 1	Dressi ng	16. 2		67. 6	16. 2	37
Acute Care Hospitals	60. 6	Transferring	29. 7		56. 8	13. 5	37
Psych. HospMR/DD Facilities	3. 0	Toilet Use	24. 3		56. 8	18. 9	37
Rehabilitation Hospitals	0.0	Eati ng	73. 0		10. 8	16. 2	37
Other Locations	6. 1	*********	******	******	******	*********	********
Total Number of Admissions	33	Continence		%	Special Treatm	ents	%
Percent Discharges To:		Indwelling Or Extern	al Catheter	2.7		spiratory Care	5. 4
Private Home/No Home Health	11.8	Occ/Freq. Incontinen	t of Bladder	64. 9	Recei vi ng Tr	acheostomy Care	0.0
Private Home/With Home Health	5. 9	Occ/Freq. Incontinen	t of Bowel	35. 1	Recei vi ng Su	cti oni ng Č	0. 0
Other Nursing Homes	17. 6	•			Receiving Os	tomy Care	0. 0
Acute Care Hospitals	5. 9	Mobility			Receiving Tu	be Feeding	2. 7
Psych. HospMR/DD Facilities	0.0	Physically Restraine	d	0. 0	Receiving Me	chanically Altered Diets	27. 0
Rehabilitation Hospitals	0. 0	j			0	<i>y</i>	
Other Locations	8. 8	Skin Care			Other Resident	Characteristics	
Deaths	50. 0	With Pressure Sores		8. 1	Have Advance		73. 0
Total Number of Discharges	55.5	With Rashes		0. 0	Medi cati ons	211 0001 100	
(Including Deaths)	34	Washes		0.0		ychoactive Drugs	45. 9

Selected Statistics: This Facility Compared to All Similar Rural Area Facilities & Compared to All Facilities

	Thi s	_	ershi p: ernment		Si ze: er 50		ensure: l l ed	Al l	
	Facility		Group		Group		Group		ities
	%	%	Ratio	%	Ratio	%	Ratio	%	Ratio
O Data Assurate Daila Communities and Dala	05.1	07.7	1 00	99.0	1 00	04.4	1 10	04.0	1 10
Occupancy Rate: Average Daily Census/Licensed Beds Current Residents from In-County	95. 1 91. 9	87. 7 76. 7	1. 08 1. 20	88. 0 74. 3	1. 08 1. 24	84. 4 75. 4	1. 13 1. 22	84. 6 77. 0	1. 12 1. 19
√	42. 4	28. 2	1. 20	36. 2	1. 24	73. 4 22. 1	1. 22	20. 8	2. 04
Admissions from In-County, Still Residing			0. 93		0. 76	118. 1	0. 72		2. 04 0. 66
Admissions/Average Daily Census	84. 6	91.3		110.6				128. 9	
Discharges/Average Daily Census	87. 2	92.8	0. 94	90. 2	0. 97	118. 3	0. 74	130. 0	0. 67
Discharges To Private Residence/Average Daily Census	15. 4	32. 9	0. 47	23. 0	0. 67	46. 1	0. 33	52. 8	0. 29
Residents Receiving Skilled Care	83. 8	90. 8	0. 92	81. 8	1. 02	91. 6	0. 92	85. 3	0. 98
Residents Aged 65 and Older	97. 3	88. 8	1. 10	96. 8	1. 00	94. 2	1. 03	87. 5	1. 11
Title 19 (Medicaid) Funded Residents	75. 7	67. 9	1. 11	79. 1	0. 96	69. 7	1. 09	68. 7	1. 10
Private Pay Funded Residents	24. 3	19. 7	1. 23	18. 6	1. 31	21. 2	1. 15	22. 0	1. 11
Developmentally Disabled Residents	0. 0	0.8	0.00	0.4	0.00	0.8	0.00	7. 6	0.00
Mentally Ill Residents	62. 2	46. 1	1. 35	60. 5	1.03	39. 5	1. 57	33. 8	1. 84
General Medical Service Residents	16. 2	14.8	1. 09	11. 1	1. 47	16. 2	1.00	19. 4	0. 84
Impaired ADL (Mean)	44. 9	49.7	0. 90	46. 3	0. 97	48. 5	0. 92	49. 3	0. 91
Psychological Problems	45. 9	56. 1	0.82	62. 1	0. 74	50. 0	0. 92	51. 9	0. 89
Nursing Care Required (Mean)	5. 4	6. 7	0. 81	4. 3	1. 24	7. 0	0. 77	7. 3	0. 74

620 GRAND VIEW AVENUE

BLAIR 54616 Phone: (608) 989-2511		Ownershi p:	Non-Profit Corporation
Operated from 1/1 To 12/31 Days of Operation:	365	Highest Level License:	Skilled
Operate in Conjunction with Hospital?	No	Operate in Conjunction with CBRF?	No
Number of Beds Set Up and Staffed (12/31/01):	98	Title 18 (Medicare) Certified?	Yes
Total Licensed Bed Capacity (12/31/01):	98	Title 19 (Medicaid) Certified?	Yes
Number of Residents on 12/31/01:	94	Average Daily Census:	96

Services Provided to Non-Residents		Age, Sex, and Primary Diagn	osis of	Residents (12/3	81/01)	Length of Stay (12/31/01)	%
Home Health Care	No	Primary Diagnosis	%	Age Groups	%	Less Than 1 Year	27. 7
Supp. Home Care-Personal Care	Yes					1 - 4 Years	39. 4
Supp. Home Care-Household Services	No	Developmental Disabilities	1. 1	Under 65	6.4	More Than 4 Years	33. 0
Day Services	No	Mental Illness (Org./Psy)	34. 0	65 - 74	1. 1		
Respite Care	Yes	Mental Illness (Other)	9. 6	75 - 84	37. 2		100. 0
Adult Day Care	Yes	Alcohol & Other Drug Abuse	0. 0	85 - 94	47. 9	**********	******
Adult Day Health Care	No	Para-, Quadra-, Hemi plegic	2. 1	95 & 0ver	7.4	Full-Time Equivaler	nt
Congregate Meals	Yes	Cancer	1. 1	j	ĺ	Nursing Staff per 100 Re	si dents
Home Delivered Meals	Yes	Fractures	7.4		100. 0	(12/31/01)	
Other Meals	No	Cardi ovascul ar	6. 4	65 & 0ver	93. 6		
Transportati on	Yes	Cerebrovascul ar	16. 0			RNs	8. 0
Referral Service	Yes	Di abetes	3. 2	Sex	%	LPNs	5. 9
Other Services	Yes	Respiratory	6. 4		j	Nursing Assistants,	
Provi de Day Programming for	i	Other Medical Conditions	12.8	Male	39. 4	Aides, & Orderlies	45. 9
Mentally Ill	No			Female	60. 6		
Provi de Day Programming for	i		100. 0		i		
Developmentally Disabled	No				100. 0		
************	*****	**********	*****	, *******	*******	*********	*****

Method of Reimbursement

		ledicare litle 18			edicaid itle 19	-		0ther			Pri vate Pay	;		amily Care			anaged Care			
Level of Care	No.	%	Per Di em (\$)	No.	%	Per Di em (\$)	No.	%	Per Di em (\$)	No.	%	Per Di em (\$)	No.	%	Per Di em (\$)	No.	%	Per Di em (\$)	Total Resi - dents	% Of Al l
Int. Skilled Care	2	100. 0	135	3	4. 5	114	0	0. 0	0	0	0. 0	0	0	0. 0	0	0	0. 0	0	5	5. 3
Skilled Care	0	0.0	0	61	91.0	98	0	0.0	0	24	96. 0	119	0	0.0	0	0	0.0	0	85	90. 4
Intermediate				3	4. 5	81	0	0.0	0	1	4.0	114	0	0.0	0	0	0.0	0	4	4. 3
Limited Care				0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0. 0
Personal Care				0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0. 0
Residential Care				0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Dev. Di sabl ed				0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Traumatic Brain Inj	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Ventilator-Dependen	t 0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Total	2	100.0		67	100.0		0	0.0		25	100.0		0	0.0		0	0.0		94	100. 0